

**Springfield Healthy Homes Collaborative Project Workplan  
February 2014**

**I. Project Title and Project Purpose Statement**

**Project Title:** *Springfield Healthy Homes Collaborative*

**A summary description of the proposed project including the goals the project seeks to achieve:**

The Springfield Healthy Homes Collaborative (SHHC) project will improve the health of residents in EJ regions of Springfield MA by reducing exposure to environmental risks in the home environment. Particularly, the SHHC project will work to reduce the high rates of asthma morbidity disproportionately experienced by communities of color and low-income residents in the Springfield. In addition, this project will reduce exposure to lead and other housing related issues by implementing a Healthy Homes approach that integrates harm reduction and home remediation strategies for various housing issues that affect health. Community residents will be actively involved throughout the initiative in leadership roles, project planning and implementation to ensure that Springfield residents have a voice in addressing housing issues and have the capacity to continue this work to improve the indoor housing environment and other environment issues as this work continues into the future.

The project's goals are:

1. Create a city-wide collaboration with community partners/stakeholders from many sectors to begin to address the health issues faced by residents due to old, substandard housing conditions.
2. Involve and empower community residents on Healthy Homes strategies and on identifying and addressing unhealthy housing issues.
3. Maintain and support the *Springfield Healthy Homes Collaborative*

**Location of project:** Springfield, Massachusetts Zip Codes 01101, 01102, 01103, 01104, 01105, 01107, 01108, 01109, 01111, 01115, 01118, 01119, 01128, 01129, 01138, 01139, 01144, 01152, 01199.

**Identify the related environmental statute(s) from the list in Section I.C., and describe how this project relates to the relevant statute(s):**

The *Clean Air Act* and the *Toxic Substances Control Act* are the focus of project activities. These acts mandate intervention in substandard housing that are an important focus for our environmental justice work to ensure equal protection from hazards. The Clean Air Act, which establishes the right to clean air, is often violated in these homes because of mold from leaky pipes and water infiltration, and from chemicals in carpets, building materials and cleaning supplies that trigger asthma and allergies. The Toxic Substance Control Act provides protections from lead found in paint in older, substandard housing that can result in severe health and developmental problems when ingested. *Springfield Healthy Homes Collaborative* intends to address health hazards in Springfield homes, particularly those related to asthma and lead paint.

**List project partners in the MOAs:**

1. Mason Square Health Task Force
2. HAP Housing
3. City of Springfield Department of Housing.

4. Arise for Social Justice: Arise
5. Baystate High Street Pediatrics:

## **II. Environmental and/or Public Health information about the Affected Community**

**Local Environmental and/or Public Health Issue that the Project Addresses:** The *Springfield Healthy Homes Collaborative* will focus on housing and health conditions impacted by poor housing, particularly asthma and lead as indoor air quality and exposure to toxics are mandated by the environmental statutes described above. As we will be using a Healthy Homes approach, the project will also address other health issues affected by housing such as injury prevention.

**Characteristics of the affected community:** The initiative will focus on Springfield, MA (Pop. 153,552; US Census 2012), a community with several state designated environmental justice (EJ) areas, the 4th largest city in New England and the central city for 28 western Massachusetts communities in Hampden County (Pop. 465,923). Springfield is a racially/ethnically diverse community with 20% of the population African-American, 37% Latino, and a variety of immigrant and refugee communities building new communities in the city, including Russian, Somali, Bantu, Iraqi, Bhutanese and Burmese. Unfortunately, some of these community residents experience some of the highest levels of poverty, health disparities and environmental injustices in Springfield.

Once a thriving city, Springfield has seen a sharp economic decline over the last several decades. Springfield struggles with high poverty rates, with 27% of residents living below the poverty level, which is 2.5 times higher than the state and 1.5 times greater than that of the county. Children have particularly high poverty rates with an estimated 39% of children in Springfield living below the poverty level within the past 12 months. Unemployment rates are high at 11%, which is almost double the state rate. As discussed above, economic racial inequities exist with African-Americans experiencing higher rates of poverty (24%) compared to white (19%) and Hispanic/Latino (17%) residents.

The Springfield target neighborhood that the year 2 pilot will focus on is Mason Square, which consists of Old Hill, Upper Hill, McKnight and Bay Area neighborhoods. The Mason Square area has a greater proportion of people of color than the City of Springfield as a whole with two neighborhoods with 50-90% people of color and the other two 90% people of color. These neighborhoods also have high rates of poverty when compared to the city overall with rates ranging from 26 – 36%. These factors lead much of the Mason Square area to be designated as Environmental Justice areas based on the Pioneer Valley Metropolitan Planning Organization's criteria for EJ designation.

**How the affected community is impacted by issue:** Poor housing conditions contribute to the asthma-related health disparities experienced by Springfield residents. Springfield has extremely high childhood asthma prevalence with 21% of schoolchildren having asthma documented in their medical record, more than double the national asthma prevalence of 9.4% (CDC). In addition, Springfield has high rates of asthma morbidity with age-adjusted asthma hospitalization rates over two times that of the state (2,123 vs. 938 per 100,000) and Hispanic and African-American residents bearing a disproportionate high burden with rates 3.5 and 1.5 times that of non-Hispanic Whites, respectively (MDPH, 2009). Children and older adults experience higher asthma disparity in hospitalization rates. Housing conditions and poor indoor air quality likely contribute to this high asthma prevalence and morbidity. In addition,

Springfield was deemed by the state as a high-risk community for childhood lead poisoning (MDPH, 2012). Springfield had the third highest rate for childhood lead poisoning in the state of Massachusetts in 2012, with a rate just over twice that of the state (1.4 vs. 0.6 per 1,000). Springfield had a lower screening rate than that of the communities with higher rates suggesting that the rate is likely an underestimate.

Springfield has an old housing stock with almost 40% built before 1940 and 86% built before 1980 (U.S. Census, ACS, 2012). A weak housing market and lower income levels in the city have led to challenges maintaining this older housing stock, which has resulted in disrepair and dilapidated conditions in homes (PVPC Impediments to Fair Housing, 2013). These conditions lead to moisture, mold, pest problems and other housing issues that lead to morbidity related to asthma and other health conditions. In addition, the combination of the older housing stock, deteriorated housing conditions, and lower income levels contribute to the high lead poisoning rates as a recent Pioneer Valley Planning Commission report estimate that 73% of housing units in the city may have the presence of lead due to the age of the housing. Low income levels make it difficult to fund needed lead remediation.

### **III. Organization's Historical Connection to the Affected Community**

**History of community involvement:** PHC's Pioneer Valley Asthma Coalition (PVAC) was founded in Springfield in 2001 and is a coalition of a variety of organizations (e.g. health care, housing, academic, social service, advocacy) and community residents that is working to improve asthma and environmental health conditions in Springfield and the Greater Pioneer Valley. Over the years, PVAC has prioritized community member input and involvement in the coalition, an important component in its successful efforts to reform policies to create asthma friendly schools and housing and to improve asthma care. Partners for a Healthier Community (PHC) is a nonprofit organization committed to building a measurably healthier Springfield through civic leadership, collaborative partnerships, and advocacy. Since its inception more than 15 years ago, PHC has included community organizing in its work to improve community health and reduce community health disparities by targeting specific health issues as well as related social and environmental determinants of health. PHC has a strong track record of supporting coalitions, engaging community members and incorporating public policy advocacy in its work.

**Community work with residents that has addressed environmental and public health issues:** PVAC has had extensive experience conducting activities to improve home and indoor air quality (IAQ) through community wide outreach and education efforts, including: outreach at community events (e.g. health fairs, community baby shower); a Springfield housing forum attended by community organizations, housing organizations, healthcare providers, other direct care providers, and residents; and asthma and Healthy Homes trainings for community health workers and community organizations. In addition, PVAC has collaborated with High Street Health Center Pediatrics, a large local Medicaid health insurer (BMC HealthNet), and a physician-hospital organization (Baycare Health Partners) as part of the PVAC's EPA Healthy Communities Grant Building Asthma Safe Environments (BASE) program and High Street Health Center's MA Dept. of Public Health's (MDPH) Asthma Disparities Initiative to help families of children with asthma improve their home environment through community health worker and home visitor education. In addition, as part of the EPA BASE initiative, PVAC also worked with these partners to implement a targeted CHW intervention to provide families of children with asthma with asthma education,

home environmental assessments, a home environmental remediation behavior change contract, and home environmental remediation tools. The program's success was used to advocate for Medicaid coverage of home visits and home environmental remediation tools and also was used to inform ensuing CHW asthma intervention initiatives, including the MDPH READY research study. These EPA and MDPH efforts also prompted the PVAC to begin to develop infrastructure to support CHW efforts to reduce asthma triggers in the home through systems change efforts and identification of local housing resources. The PVAC has also worked with local and regional schools systems and community partners to improve school IAQ. The success of this work in Springfield led to the current EPA funded Regional Indoor Environments "Breathing Easy" grant. Through this initiative, PVAC is working with three local systems to train them on a modified version of Tools for Schools using lessons learned from the Springfield Public Schools. Information and lessons learned from this project will be disseminated regionally so that other school systems can learn from these experiences. PVAC has also been involved in advocacy efforts to improve outdoor air quality in Springfield, including as a partner in PHC's current EPA Environmental Justice small grant program initiative, "Springfield Community Air Mobilization Project," which involves organizing community residents to address air pollution in their neighborhoods. Also, PVAC and PHC as a whole were leads on the EPA CARE Level 1 grant, "Healthy Environment, Healthy Springfield (HEHS)," which worked to mobilize community stakeholders to assess, prioritize and develop a plan for addressing environmental risks in Springfield. Numerous community education and organizing efforts around a variety of environmental hazards occurred through HEHS. PHC also has other initiatives focusing on other aspects of the environment, including its Live Well Springfield Coalition (2007-ongoing), which includes a focus on advocacy of environmental policies related to the built environment, such as smart growth and improved walkability and access to healthy food, including mobile produce markets, expansion of farmers markets and current land assessment work for urban agriculture. All of this work is based on the Pioneer Valley Planning Commission regional food security report (2013) and priorities in the regional transportation plan. A healthy homes strategy will compliment and be integrated into these city wide and regional efforts.

**How residents are part of the decision-making process:** PVAC and PHC have worked to involve residents in the decision-making processes of their initiatives and of their organization as a whole. PVAC has actively worked to engage residents in its initiatives and coalition leadership over time through community resident asthma and leadership training. In addition, PVAC is partnering with grassroots and community-based organizations (e.g. ARISE for Social Justice, Springfield Partners for Community Action) as collaborative leads on initiatives to ensure that initiatives reflect resident needs and that a resident voice is present. Similarly, PHC includes Springfield residents on its Board of Directors, and includes residents on Project Steering Committees for its other initiatives, including the Live Well Springfield Initiative.

**Community work to increase capacity to address local environmental and public health issues:** PHC and PVAC have had great success building local community capacity to address environmental and public health concerns. As described above, PVAC and PHC organize collaborative efforts to address a number of environmental and public health issues in Springfield. PVAC has been involved for years advocating for systems change to improve indoor and outdoor air quality in Springfield and IAQ in schools, homes and day care. PHC organizes the Live Well Springfield Coalition, which is engaged in a multi-prong approach to: 1) increase physical activity by improving environment and built environment conditions that will foster

activity, 2) increase healthy eating, and 3) public policy changes to sustain these efforts.

**How the applicant has maintained and sustained an ongoing relationship with the affected community's residents and/or organizations:**

PHC and PVAC are Springfield-based organizations/coalitions themselves, with many coalition members that are Springfield residents, organizations, agencies and groups. They have been productively engaged in Springfield for 10-25 years. PHC and PVAC have long utilized inclusive, community consensus building processes to affect change in the community. As discussed above, PVAC and PHC have created long-term partnerships to ensure community resident involvement and leadership in initiatives and have worked to involve residents in their organizational leadership structure.

#### **IV. Project Description**

**A concise description of the activities that examine and address the environmental health**

**issues:** Led by the Partners for a Healthier Community (PHC)'s Pioneer Valley Asthma Coalition (PVAC), the Springfield Healthy Homes Collaborative (SHHC) project will improve the health of residents in EJ regions of Springfield MA by reducing exposure to environmental risks in the home environment. Particularly, the SHHC project will work to reduce the high rates of asthma morbidity disproportionately experienced by communities of color and low-income residents in Springfield. In addition, this project will reduce exposure to lead and other housing related issues by implementing a Healthy Homes approach that integrates harm reduction and home remediation strategies for various housing issues that affect health. Community residents will be actively involved throughout the initiative in leadership roles, project planning and implementation to ensure that Springfield residents have a voice in addressing housing issues and have the capacity to continue this work to improve the indoor housing environment and other environment issues into the future.

Through this project, **SHHC** will bring together community residents, housing organizations, City of Springfield municipal departments and other stakeholders to: 1) develop infrastructure to connect Springfield residents, community health workers (CHWs), and organizations assisting residents to needed housing resources to remediate home environmental hazards that contribute to poor health, 2) build capacity among community partners/stakeholders to maximize local resources to improve housing stock and related health issues by training partners on the Healthy Homes model as well as on available housing related resources available through SHHC, and develop communications channels for cross-referral as appropriate to ensure that residents are receiving all of the opportunities for housing remediation available, and 3) pilot a targeted CHW model to connect residents with asthma in need of home remediation to the Healthy Homes Resource Network (HHRN) developed by the SHHC and use feedback from CHWs and residents served to modify network as needed and identify lessons learned, successful practices, and barriers.

As discussed in Section II, Springfield has an old housing stock with many houses that are in state of disrepair or neglect due to economic challenges faced by many Springfield residents, homeowners and landlords. This older housing stock likely contributes to the high asthma prevalence and rates of morbidity and high rates of childhood lead poisoning in Springfield. Though there are housing resources available, 1) residents are often unaware that they exist, 2)

application processes are complex and challenging to complete and thus a barrier to accessing services, 3) resources are available by program within an organization, often leading to silos with little cross-communication between programs and organizations about other possible housing remediation resources, thus minimizing potential for synergy between programs to reduce home environmental hazards and improve the housing stock, many housing programs and other organizations working with individuals experiencing home environmental hazards that impact asthma and other health conditions are not aware of the types of housing remediation measures available that can be implemented to reduce asthma triggers (e.g. weatherization programs that seal cracks and crevices and thus are a component of Integrated Pest Management that may be used to reduce pest exposure for people with asthma).

Table 1 describes the goals, activities, timeline and milestones planned for this initiative. The following provides an overview of the specific activities included.

#### Building the Springfield Healthy Homes Collaborative (SHHC) (Goal 1, Objective 1.)

A Housing Forum in 2007 led by Pioneer Valley Project and PVAC found that both residents with asthma and housing agencies saw the need for documentation of housing problems, identification of available resources, communication among agencies as well as communication between agencies and residents. Similarly, CHW housing intervention pilots found the need for identification of resources to address the housing remediation needs identified to improve asthma-related health of families. The SHHC will be the first effort to bring together these groups into a collaboration to address these concerns. We will build on the work initiated through the previous PVAC Healthy Homes work to create a formal Springfield Healthy Homes Collaborative and network.

#### Create a city-wide Healthy Homes Resource Network (HHRN) (Goal 1, Objective 2)

In partnership with the SHHC, PVAC will create a city-wide Healthy Homes Resource Network (HHRN) where residents, health, social service and other direct care agencies can research and access existing resources to identify and address unhealthy environmental and other public health conditions in local homes. Activities will include: 1) data assessment - gathering and analyzing available data on housing in Springfield in order to assess and prioritize the needs related to health, 2) inventory - identifying and cataloging resources related to housing that are currently available, 3) capacity building - a. hold Stakeholder Healthy Homes Training for the SHHC, their staff and community residents, and b. cross-train stakeholders on resources available from other agencies and sources, 4) dissemination – website, awareness campaign, distribution of culturally competent, accessible (e.g. appropriate reading level for general public) materials. In addition, a targeted pilot will be conducted in the Springfield Mason Square area, which includes having Mason Square Health Task Force CHWs connect high-risk children and older adults with asthma to the HHRN so that we can assess efficacy of access to resources, identify facilitators for using the HHRN, and identify and address barriers towards accessing the HHRN.

#### Resident Engagement (Goal 2, Objective 1)

Residents will be actively engaged to participate in the project as part of the project leadership team (Core Project Team), planning and implementation of initiative activities, conducting the housing assessment, and disseminating information about the HHRN and Healthy Homes. As

part of these efforts, the Mason Square Health Task Force (MSHTF), a community-based organization that works to address health issues in the Mason Square area, will lead efforts in engaging residents through their extensive community engagement and organizing activities. The MSHTF is representative of the community with many staff and Board members that are residents of the Mason Square area. The pilot will target Mason Square residents, building their capacity to address housing issues that impact health through a community forum that will train residents on the HHRN and Healthy Homes. The work will build on previous EJ efforts to empower community residents in multi-stakeholder efforts to address the environment through the PHC-led EPA CARE project and EPA EJ Small grants Springfield Community Air Mobilization project which focuses on reducing exposure to outdoor air pollution in Springfield neighborhoods, one of which is Mason Square.

Targeted HHRN Pilot with CHWs in Springfield’s Mason Square area (Goal 2, Objective 2)

A pilot will be conducted with CHWs from the Mason Square Health Task Force (MSHTF) to identify high-risk asthma children and older adults and connect them to resources to address their homes. Mason Square is a Springfield EJ neighborhood with a very large proportion of people of color and high rates of poverty (see Section II- characteristics of affected community) and its residents are disproportionately affected by asthma and other health issues that are impacted by the environment. MSHTF utilizes CHWs to assist residents with accessing community preventative health resources and education. The Healthy Homes work will be added to the current activities of the MSHTF CHWs. CHWs will provide up to three home visits to identified high-risk families (children and older adults) that have poorly controlled asthma, including a housing assessment, referral to the HHRN resources as appropriate to address housing issues, and a follow-up to assess access to resources and efficacy of referral. Information from the CHW pilot will be used to assess efficacy of the HHRN and identify barriers and facilitators to utilization. Information will be used to modify the HHRN as needed to ensure accessibility and usability. In addition, we will use information from the pilot to advocate for other Springfield CHWs to include Healthy Homes and referrals to the HHRN in their work with community residents.

Maintain and Support Springfield Healthy Homes Collaborative (Goal 3)

Structures will be created to embed the Healthy Homes and HHRN activities in existing infrastructure in the community to ensure sustainability. MSHTF, the lead project partner, will include HHRN and Healthy Homes education and information in their community engagement activities (e.g. Community Health Check-Ups). PVAC will reconvene their Housing Subcommittee to take the lead on updating the HHRN list in the future. In addition, PVAC and project partners will identify opportunities to advocate for funding to sustain this work going forward, particularly focusing on CHW Medicaid reimbursement for Healthy Homes work as that was recently approved by CMS, but has yet to be implemented in Springfield.

**Table 1.**

<b>ACTIVITIES, TIMELINE &amp; MILESTONE CHART</b>
<b>GOAL 1: <i>CREATE A CITY-WIDE COLLABORATION – SPRINGFIELD HEALTHY HOMES COLLABORATIVE, WITH COMMUNITY PARTNERS/STAKEHOLDERS FROM AS MANY APPROPRIATE SECTORS AS PRACTICABLE, TO START TO ADDRESS THE HEALTH ISSUES FACED BY RESIDENTS DUE TO OLD, SUBSTANDARD HOUSING CONDITIONS</i></b>

<b>Objective 1. Create Healthy Homes Partnership</b>			
<b>Activity</b>	<b>Timeline</b>	<b>Party Responsible</b>	<b>Milestones</b>
Establishment of Core Project Team	Oct 2014-Mar 2015	Project Manager, Lead Project Partners	4-7 member Core Project Team identified 6 meetings held
Outreach to additional stakeholders in housing and variety of other sectors	Oct 2014-Mar 2015	Project Manager, Lead Project Partners	- Stakeholder analysis completed identifying current stakeholders and other potential partners - Stakeholder engagement plan developed - 5 new key stakeholders involved
<b>Objective 2. Create a city-wide Healthy Homes resource network (HHRN)</b>			
<b>Activity</b>	<b>Timeline</b>	<b>Party Responsible</b>	<b>Milestones</b>
Springfield housing and health data assessment	Oct 2014-June 2015	Project Manager	- summary of data on housing and health in Springfield
Springfield housing resources inventory conducted	Oct 2014-Sept 2015	Project Manager	- inventory of available housing resources - list of housing resources not available (i.e. gaps)
Infrastructure created for Healthy Homes referrals and streamlined access to resources	July-Sept 2015	Project Manager, MSHTF	- Healthy Homes web version created on PVAC website - process in place for referrals to Healthy Homes resources and streamlined access
Educate Healthy Homes Collaborative, residents and other stakeholders on Healthy Homes and resource network	April- Sept 2015	Project Manager, MSHTF	- training conducted - 25 participants attend training representing 15 organizations
Disseminate information on resource network and Healthy Homes materials	July 2015-Sept 2016	Project Manager, MSHTF Communications Consultant	- awareness campaign developed and conducted - 2000 HHRN and Healthy Homes materials disseminated to at least 25 organizations -500 web visitors
<b>GOAL 2: <i>Involve and empower community residents on healthy homes strategies and on identifying and addressing unhealthy housing issues</i></b>			
<b>Objective 1. Actively engage residents.</b>			
<b>Activity</b>	<b>Timeline</b>	<b>Party Responsible</b>	<b>Milestones</b>



Community housing forum	Oct 2014-Mar 2015	MSHTF	- forum conducted with 50 residents participating - at least 5 residents committed to participating in Healthy Homes Collaborative
Build capacity to address housing issues	April- Sept 2015	MSHTF	- community forum held on training on linkages between housing and health and steps individuals can take to improve the home environment as well as information on how to access resources through the HHRN
Dissemination	Oct 2015-Sept 2016	Project Manager, MSHTF	- 5 avenues identified to disseminate to residents - resident stories featured on website
<b>Objective 2: Conduct pilot to connect CHWs to Healthy Homes Resource Network and Healthy Homes Collaborate initiative with the Mason Square Health Task Force</b>			
Pilot Development	Oct 2014-Sept 2015	Project Manager, MSHTF	- plan developed for using CHWs to link high-risk residents with asthma in Mason Square to resources through Healthy Homes Resource Network (HHRN)
Build capacity to conduct pilot	July 2015-Sept 2015	Project Manager, MSHTF	- CHW training on Healthy Homes and HHRN conducted
Implement pilot	Oct 2015-July 2016	MSHTF	- 50 families of children with asthma or older adults with asthma referred to HHRN by CHWs
Evaluate pilot	Aug 2016-Sept 2016	Project Manager, MSHTF	- data gathered on: number of families participating, number utilizing HHRN, number making changes to homes, etc. - barriers and facilitators of implementation documented
<b>GOAL 3: Maintain and support the Springfield Healthy Homes Collaborative</b>			
<b>Objective 1: Embed the Healthy Homes Resource Network and Healthy Homes Collaborative in existing community infrastructures</b>			
<b>Activity</b>	<b>Timeline</b>	<b>Party Responsible</b>	<b>Milestones</b>
Incorporate HHRN and Healthy Homes work into existing community engagement activities	July 2016-Sept 2016	MSHTF	- Include HHRN and Healthy Homes work in Mason Square Health Task Force community check-ups

Develop PVAC infrastructure to sustain HHRN	Oct 2014-Sept 2016	Project Manager	- reconvene PVAC Housing Subcommittee - plan for updating HHRN list developed
Advocate for strategies to facilitate Medicaid reimbursement of CHW Healthy Homes work	Oct 2015-Sept 2016	Project Manager, Lead Project Partners	- plan created for how to link Medicaid CHW reimbursement to HHRN and Healthy Homes work - advocacy strategies conducted

**Linkage to EPA Strategic Plan Goals:** These activities link to EPA Strategic Plan Goal 3, by cleaning up substandard housing, working for environmental justice by focusing on an EJ community and targeting children with asthma or lead paint exposure. The project also support EPA's themes of making a visible difference in our community and addressing climate change (weatherization to prepare for climate change) and improving air quality (reducing indoor air hazards).

**Project Evaluation:** Information on output (e.g. number of trainings, number of attendees) and outcomes (e.g. number of people accessing resources through HHRN, number of people with home improvements through HHRN) from activities will be compiled by the Project Director as described by the attached Logic Model/Performance Measures. Output and outcome data related to lead partner activities will be reported by the lead partner to the Project Director on a monthly basis. This information will be summarized and reported to the Core Project Team on a quarterly basis. The Core Project Team will review the data and make modifications to program activities as appropriate based on success in reaching project target goals, efficacy, etc.. Upon completion of the project, output and outcome data from project will be compiled in addition to targeted qualitative data (e.g. stakeholder interviews, Core Team evaluation form) and available quantitative data (e.g. housing data, health data) to assess program's completion of project plans, efficacy, and barriers and facilitators to implementation.

**Community Benefit:** Through community forums and training, residents of Mason Square will learn how to identify home environments that can harm their health and that of their families. The 50 high-risk individuals or families who are referred to MSHTF CHWs trained in Healthy Homes will receive assistance in identifying home environmental concerns and remediating those issues. The public awareness campaign will educate and empower residents citywide to understand the importance of making their homes safer and less harmful to health while the web-based HHRN will streamline the process for accessing Healthy Homes resources for all city residents, empowering them to advocate more easily for necessary home improvements. Stakeholder organizations will also benefit from this collaboration by moving out of the silos between organizations to better understand community need and available resources through the data assessment and the development of the inventory. Working in collaboration, these organizations will have a stronger case for accessing other funding that will address the identified gaps. Overall the program will lead to improved housing conditions in Springfield and in particular in the Mason Square area.

**How the collaborative problem solving model elements may be incorporated into the project:** *Springfield Healthy Homes Collaborative (SPHHC)* is based on the EPA's Collaborative Problem

Solving model. At least 5 of the seven elements will be utilized in this project. The community issues around asthma and healthy environments have already undergone the issue identification, community visioning and strategic goal setting element of the model (Element 1). These occurred when the Pioneer Valley Asthma Coalition was created and also under the Healthy Environment, Healthy Springfield planning project. The community was involved in organizing around the high incidence of asthma, especially pediatric asthma, in Springfield and beyond. The forums and workshops held during the Healthy Environment, Healthy Springfield planning period brought residents together to become more educated on local environmental risks and ranking them for strategic action. Environmental tobacco smoke, mold in indoor environments, pests and pesticide use indoors, indoor chemicals and lead paint were 5 of the top 11 issues ranked for community action. SPHHC will commence the community capacity-building (Element 2) during the public education campaign and foster leadership development in the more neighborhood-focused Mason Square Healthy Homes pilot initiative. Residents in the four Mason Square neighborhoods will become more knowledgeable and savvy about identifying and addressing unhealthy environments in their homes, and have the tools to work with their landlords to make changes. CPS Element 3 – Consensus-Building and Dispute Resolution has been duly included in the design of this project, especially since the Collaborative intends to recruit other members that may be landlords or home renovators. Issues arising from disputes will be provided with facilitated negotiation to bring the parties to acceptable resolutions. CPS Element 4 is represented as a key objective of Springfield Healthy Homes Collaborative. The project will create the Healthy Homes Resource Network, which will allow Collaborative partners to share their resources and leverage others as part of the formal Network and identify new partners to either add to the resources available or to address other issues that become emergent during the planning. Two City of Springfield departments have committed to become part of the collaborative. This strategy is aimed at utilizing Element 5 to the fullest possible. The project intends to invite the Mass Department of Public Health to become a participant in the Collaborative, and also recruit the City's newly-created Green Commission. These government agencies could play a variety of roles within SHHC that may help to broaden and deepen the reach of the project. The project has had conversations with two local health insurers and Western Massachusetts Electric Company, a local utility provider to possibly become part of the Collaborative.

**How the organization's efforts will increase the community's capacity to address local environmental and/or public health issues.** By providing a strategy and resources for identifying home conditions that lead to health problems like asthma, and making needed improvements in housing conditions, the SHHC will create a unified, streamlined and cross referral mechanism that can continue beyond the life of this grant. The CHWs trained in Healthy Homes strategies, both those from MSHTF and others who work city-wide, will increase their ability to identify home environmental concerns and offer specific and meaningful strategies to assist residents in reducing exposures that lead to ill health.

**Description of how the organization and its partners will work together during the year to address the local issue(s).** *In its role as applicant, PHC/PVAC bring their combined experience in convening, partnerships, program delivery and evaluation to this project. PHC/PVAC is the overall coordinator for this project and its responsibilities include: convening the development of the a Healthy Homes Resource Network; coordinating the implementation of Springfield*

Healthy Homes Collaboration EJ CPS grant work plan; coordinating training of the HHRN member staff representatives and community health workers; overseeing development of the HHRN resource listing and one-stop center website; supervising the piloting of activities with MSHTF; coordinating the development of the awareness raising campaign; and handling grant management, evaluation and reporting. **The Mason Square Health Task Force (MSHTF)** is a community coalition working to eliminate racial health disparities in Mason Square through information sharing, capacity building & policy change. MSHTF will be the primary partner to implement outreach and programmatic activities with residents from the Mason Square area and city-wide. MSHTF responsibilities include: functioning as operating partner for the pilot activities in Mason Square; convening community forums on housing concerns and healthy homes concepts; providing community health work staff to be trained and to implement pilot; and reporting periodically on community health workers efforts and data collection. **The Springfield Office of Housing (SOH)** works to improve the City's housing stock and residential neighborhoods, bringing city support and resources to this project. By partnering with the SOH, there is potential for change in funding and housing condition policies that can directly support furthering the goals of the SHHC. **HAPHousing (HAP)**, a community development corporation, provides innovative forms of housing assistance to tenants, homebuyers, homeowners and rental property owners. HAPHousing is the largest nonprofit developer of affordable housing in Western Mass, and a collaborative partner in urban neighborhood revitalization as well as the region's Housing Consumer Education Center. HAP offers on-the ground services as well as a depth of knowledge on Springfield's housing needs and experience with tenants, homeowners, and landlords. Their sharing of resources and training of staff in healthy homes concepts will provide a critical component to the SHHC. **Arise for Social Justice (ARISE)** is a Western MA low-income rights organization which believes that community members have the right to speak for themselves. Its members are poor, homeless, at-risk, working, unemployed & people pushed to the side by society. They are the key community organizing group on voting rights, homelessness, housing, health care, criminal injustice in the Springfield area. ARISE will bring its wealth of experience in supporting and organizing residents on housing issues in Springfield and will provide resident participation on the Core Project Team. **Baystate High Street Health Center Pediatrics (BHSACP)** serves an underserved inner city population with low literacy, socioeconomic struggles and complex medical needs. Approximately 25% of patients have a diagnosis of asthma, and one-third of those have moderate to severe asthma. BHSACP's programs, particularly its READY initiative to provide CHWs for asthma management in Springfield, have direct knowledge of the gaps in resources needed to reduce exposure to asthma triggers in the home. BHSACP participation will bring a key voice of the medical community and assistance in building a referral system useful for physicians and insurers. Together, all partners have agreed to the following responsibilities: sharing information on their organizational resources related to Healthy Homes concepts to the HHRN; sharing HHRN resources and information internally and educate staff and members on Healthy Homes concepts; participating in HHRN stakeholder meetings; advocating to adopt healthy homes concepts across the city; and search for resources and opportunities to further HHRN efforts. Other Key Stakeholders who have expressed interest: The **Springfield Division of Health and Human Services (SHHS)** provides environmental health, community nursing and health education services for the City of Springfield, MA. **Springfield Partners for Community Action**

(SPCA) is the federally designated Community Action Agency (CAA) for the greater Springfield area, serving about 10,000 low-income people annually. SPCA provides weatherization assistance and housing counseling services. In addition to these partners, we have also identified other key stakeholders to bring to the table including health care insurers and local utilities, who can bring valuable resources linking energy efficiency and health care. In particular, our efforts to engage insurers will focus on advocating for policies and practices to support CHW visits and home remediation policies.

**How the applicant plans to maintain and sustain the partnerships.**

PVAC Manager Sarita Hudson will be the Project Manager for this program. The Project Manager, Lead Project Partner representatives including a Community Resident will form a Core Project Team who will meet monthly, and as needed, to oversee all aspects of the work. In addition, Project Manager and MSHTF Director will meet weekly, or as needed, to coordinate activities and advance the goals of the project. In addition, the Core Project Team will meet with other stakeholder groups quarterly or as needed to assess the project and its progress. PVAC will re-activate its Housing Committee and invite the members of the Collaborative on board to provide an ongoing structure to support and advance the work of advocating for Healthy Homes in Springfield. For more details, see Table 1, Goal 3 for plans for further plans for sustainability.

## **V. Organizational Capacity and Programmatic Capability**

**Organizational and Administrative Systems:** PHC has successfully managed a number of federal, state and foundation grants in the past. PHC's utilizes a QuickBooks accounting system to track project expenditures and project budgets. In addition, Project Directors regularly review expenditures to ensure appropriate allocation of grant expenses. PHC's system was recently commended during an enhanced monitoring evaluation conducted upon completion of PHC/PVAC's EPA Region 1 Healthy Communities grant.

**Project Management History and Past Federal Grants:** PHC has successfully managed the following federal grants within the past 5 years, the majority of which were PVAC grants. We have met all reporting requirements, including progress reports, MBE/WBE reports, financial status reports and final reports (as appropriate), in a timely manner as dictated by the deadlines for each specific grant. For all these grants, PVAC carefully tracked/reported on outputs/outcomes corresponding to each project's work plan. Outputs and outcomes were tracked using tools specific to the activity (e.g. sign-in sheets) on a regular basis, as each activity was completed and reported in progress/final reports. Project partners and sub-awardees were required to regularly report outputs/outcomes from their project activities to the project director. PVAC successfully completed activities in the timeline indicated in each project workplan overall.

**Federal Grants (within the past 5 years)**

- EPA Regional Indoor Environments: Reducing Public Exposure to Indoor Pollutants grant (10/1/12-9/30/14)
- EPA EJ Small Grant Program "Springfield Community Air Mobilization Project" (10/1/12-3/31/14)
- EPA CARE grant "Healthy Environment, Healthy Springfield" (10/1/10- 9/30/12)- agreement # RE-96138401; Project Officer – George Frantz

- EPA Region 1 Healthy Communities Grant “Building Asthma Safe Environments” 10/1/08-9/30/11 ; agreement # HC-97195201; Project Officer-Dr. Marybeth Smuts
- Asthma Disparities Initiative – (10/1/10-current) DPH Asthma Prevention (CDC pass-through); # INFT3056M04002013007; Project Officer – Jean Zotter.
- Mass Pregnant & Parenting Teen Initiative ((3/1/11-9/30/13)) DPH Teen Pregnancy Prevention (CDC pass through); # INFT3213MM3106214001; Project Officer - Dahlia Bousaid

**Project Management Plans:** The *Springfield Healthy Homes Collaborative* Project Director has had experience successfully managing EPA/federal grants in the past. She will follow the project workplan to ensure timely completion of project activities and will ensure that all reporting requirements are met within the required timeline. She will gather information on project activities, outcomes and outputs regularly to ensure that the *Springfield Healthy Homes* initiative is on track for completion and will report this to the Core Project Team (CPT) on a monthly basis. Any delays or issues will be reported to the CPT who will collectively identify alternate methods for completion. Delays will also be reported to the EPA Project Officer as appropriate. The Project Director will also work with the PHC grants manager to track project expenses and ensure that the project funds are being spent down as allocated. Any required budget modifications will be discussed with the Project Officer and will only be made upon approval within the guidelines as specified by the EPA.

#### **VI. Qualifications of the Project Manager (PM)**

The SHHC Project Manager has strong qualifications in the social services field, being involved in community collaborations for over 25 years. She has had extensive experience with grant implementation, budgeting, evaluation and reporting that will provide valuable project management skills to the *Springfield Health Homes* project. She has been the Manager of the Pioneer Valley Asthma Coalition, working with that Steering Committee, City agencies and community residents to combat the high rates of asthma in Springfield and the Pioneer Valley. The PM has been an integral part of a Springfield-based collaboration to improve asthma and indoor air quality in local schools, a Mass DPH-funded Indoor Air Quality grant project. She is also a collaborator on a local Environmental Justice grant that was funded by the EPA. She has been trained in primary prevention and evaluation at an institute held in Chapel Hill, NC and holds a Supervisory Skills certificate. In addition, the Project Manager has had over three years' experience in working with faith-based communities in Springfield. Some of the titles she has held through her career are: Director of Public Engagement, Training Consultant, Parish Social Ministry Education Coordinator, and Director of Field Development in various non-profit entities, both locally and elsewhere.

#### **VII. Past Performance in Reporting on Outputs and Outcomes**

**How Outputs and Outcomes were documented and reported:** PHC has had successful experience reporting on outputs and outcomes for a number of federal and foundation grants, including the following 5 grants (details provided below): two EPA cooperative agreements, two state grants (using CDC pass-through funds) and one foundation grant. For all of these grants, PHC was required to carefully track and report on outputs and outcomes corresponding to each project's workplan. Outputs (e.g. number of participants, number of meetings) and outcomes

(e.g. number of EJ policies implemented, number of people with improved asthma) were tracked using tools specific to the given activity (e.g. sign-in sheets, tracking spreadsheets) on a regular basis as each activity was completed. Project partners and sub-awardees were required to regularly report outputs/outcomes from their project activities to the project director, specific to the needs of the given grant. These outputs and outcomes were reported in the corresponding progress and final reports in the timeframe required by the respective funding agency.

**Documentation on outputs and outcomes for which no progress was made:** PHC has been successful in completing activities in the timeline indicated in each project workplan overall. In the rare case when we have not met the project timeline during the course of the project, we have communicated to our Project Officer explaining the delay, documented this in our progress reports, and discussed a revised timeline for completion. In these cases, we have completed the activities within the adjusted timelines. The following are the federal and state grants discussed above that we are current or previous recipients of:

**EPA Cooperative Agreements**

- EPA CARE grant “Healthy Environment, Healthy Springfield” (10/1/10- 9/30/12)- agreement # RE-96138401; -Total funding \$84,708; Project Officer – George Frantz
- EPA Region 1 Healthy Communities Grant “Building Asthma Safe Environments” (10/1/08- 9/30/11) ; agreement # HC-97195201; Total funding -\$34,594; Project Officer-Dr. Marybeth Smuts

**State Grants (using Federal pass-through funds)**

- Asthma Disparities Initiative – (1/15/10-6/30/12) DPH Asthma Prevention (CDC pass-through); # INFT3056M04002013007; Total Funding: \$92,500; MDPH Project Officer – Jean Zotter.
- Mass Pregnant & Parenting Teen Initiative (3/1/11-6/30/14) DPH Teen Pregnancy Prevention (CDC pass through); # INFT3213MM3106214001; Total funding: \$300,000; MDPH Project Officer - Dahlia Bousaid

**Foundation Grant**

- Road Maps to Community Health Program – (10/15/11-10/14/13); Robert Wood Johnson Foundation; # 695116951; Total funding: \$200,000; Project Officer - Thomas Andruszewski

**VIII. Expenditure of Awarded Grant Funds**

PHC systems are designed to pay bills within 30 days and the project will make purchases early in the grant period to ensure that there is no need for a budgetary extension. Contracts will be expedited early in the grant period and payments completed before the grant ends.

**IX. Quality Assurance Project Plan (QAPP) Information**

**Use of Existing Environmental Data or Collection of New Data:** PVAC/PHC will utilize general existing housing, public health and neighborhood data if needed to implement the objectives and activities of this project. Should additional existing data be available that will be useful for our assessment, then we will take steps necessary to complete a QAPP at that time.